

AMENDMENT NO. 2

This Amendment modifies Contract No. 1418-13262, for Professional Architectural and Design Services for CCAB Renovation Floors, 7, 8 & 9 by and between the County of Cook, Illinois, herein referred to as "County" and RADA Architects Ltd, authorized to do business in the State of Illinois hereinafter referred to as "Contractor":

RECITALS

Whereas, the County and Contractor have entered into a Contract approved by the County Board on May 21, 2014, (hereinafter referred to as the "Contract"), wherein the Contractor is to provide design services (hereinafter referred to as the "Services") from June 1, 2014 through December 31, 2015, in an amount not to exceed \$158,800.67; and

Whereas, Amendment # 1 was executed on November 17, 2015 to extend the contract from January 1, 2016 through February 1, 2017 and to increase the contract in the amount of \$108,806.00; and

Whereas, the Contract will expire on February 1, 2017, and the agreed upon Services are still required; and

Whereas, an extension is desired for the continuation of Services; and

Whereas, an increase in the amount of \$96,000.00 is required for the continuation of Services; and

Whereas, the County and Contractor desire to extend the Contract for one year beginning on February 2, 2017.

Whereas, the County and Contractor desire to include additional scope of services to the Contract; and

Now therefore, in consideration of mutual covenants contained herein, it is agreed by and between the parties to amend the Contract as follows:

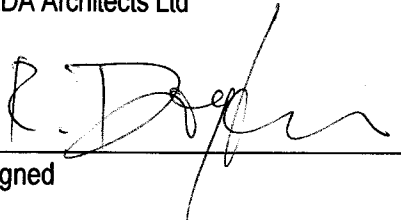
1. The Contract is extended through February 1, 2018.
2. The Contract is increased by \$96,000.00 and the Total Contract Amount is revised to \$363,606.67.
3. The Contract is hereby amended to incorporate Attachment A and made part of the Contract.
4. The attached Economic Disclosures Statement, Identification of Sub-Contractors/Suppliers/Sub-Consultants Form and DBE Utilization Plan forms are also incorporated under Attachment B and made a part of this Contract.
5. All other terms and conditions remain as stated in the Contract.

In witness whereof, the County and Contractor have caused this Amendment No. 2 to be executed on the date and year last written below.

County of Cook, Illinois

RADA Architects Ltd

By: 
Chief Procurement Officer


Signed

Rada Doytcheva
Type or print name

President
Title

Date: 29 July 2016

Date: 7/5/16

CHANGE ORDER REQUEST
CHANGE TO CONSULTANT CONTRACT
OFFICE OF CAPITAL PLANNING AND POLICY

DATE: 01-Jun-16

PROJECT: CCAB Renovation - 7th, 8th & 9th Floors

C. C. PROJECT DIRECTOR: Sheila Atkins

CONSULTANT: RADA Architects Ltd

CC DOC. NO: 1418-13262

P.O. NO: ~~189455~~ 189436

SPECIFY TYPE: BASIC SERVICES ADDITIONAL SERVICES X REIMBURSABLES

CHANGE ORDER (C.O.) ITEM NO: 2

This is not the C.O. number. It is the proposal (item) number (i.e. 01, 01r1, 02, etc.) submitted by Consultant.

COOK COUNTY ASSIGNED C.O. NO:

There may be more than 1 item assigned to a C.O.

This item will result in change to the Contract in the form of a CREDIT ADD X IN THE AMOUNT OF: \$96,000.00

This item will INCREASE X DECREASE the Contract Time by the following number of days: 365

Who initiated this change order request? (Check all that apply below):

Owner User Agency AE/Consultant X Other (Specify):

What is the reason for this Change Order request? (Check all that apply below):

Unforeseen Condition Field Condition Code Change Other (Specify): CCAB Space and Furniture Standards Development

Below, provide additional information (if any) considered relevant to this change order:

- Standardize the various office components for CCAB and other admin spaces in the county buildings
 - Standardize the finishes, furniture, and extent of treatment of the typical repeatable spaces throughout the building
 - Have the ability to quickly address such needs, and more economically as well - by shortening the planning process for each such project
- This will allow procurement and OCP & P make ongoing work orders without using the services of an architect and spending the time and money - for smaller ongoing requests

The Project Director shall attach the following to this form:

> Analysis

List additional relevant attachments below:

SPACE STANDARDS ORDINANCE
Space Standards
Consultant Proposal Package
Time Schedule

SUBMITTED: *Sheila Atkins*

CCF PROJECT DIRECTOR

REVIEWED: *Keith* 6/14/16

CCPP DEPUTY DIRECTOR



May 9, 2016 (Rev. June 1, 2016)

Ms. Sheila Atkins
Project Director
Cook County Office of Capital Planning & Policy
69 W. Washington Street, 30th Floor
Chicago, IL 60602

Re: **Professional services for CCAB Space and Furniture Standards Development and related Administrative Spaces in other Cook County Buildings**

Dear Sheila,

The following is to address the development of Building Standards, taking advantage of our work for the project for the Public Defender Office, as discussed in numerous meetings recently starting from last fall. Attached are also some of the thoughts and documents developed at the previous meetings.

Here is our understanding of the scope of work:

SCOPE OF WORK

The aging building stock at CCAB requires updating of numerous departments throughout the building, a process which so far has taken place as separate projects. There is a need to:

- Standardize the sizes of the various office components as well as the concept of the open offices as a new directive from CCOPP;
- Standardize the finishes, furniture, and extent of treatment of the typical repeatable spaces throughout the building;
- Have the ability to quickly address such needs, and more economically as well - by shortening the planning process for each such project;
- Allow for economical larger scale purchase agreements with furniture and finishes vendors;
- Allow to assure consistent and high quality of work throughout the building;
- Take the successful application of such standards to other Cook County Administrative Buildings.

WORK PROCESS

RADA Architects is to base the Building Standards Document on the current project for the Public Defender Office and for Adult Probation Department. As the CCAB building is mostly administration, such standards will address the majority of the spaces in other departments. The work process will involve:

PHASE ONE:

Survey of all categories of spaces at CCAB – as far as programmatic types. Create groupings of Offices, Collaborative and Support Spaces. Interview facilities at CCAB and OCP&P as to what other varieties of programmatic space needs may exist in the other administrative buildings. The Final product of this phase would be a full tally of the variety of Office, Collaborative and Support arrangements – that will be subject to the standards development. The summary of this phase will identify the programmatic



requirements for all categories and within the categories types of standard layouts, including open office work arrangement, enclosed offices, support spaces and conferencing and training facilities.

PHASE TWO:

Development of the individual types within the categories. Develop for each space a sample layout and sample furniture dimension. Show the ranges of room sizes that could be accommodate them. Reduce the variety of types of spaces as much as possible. Develop a variety of open office arrangements that would address different sizes and configuration of spaces. Prepare a summary document for review with facilities and OCP & P

PHASE THREE:

Upon approval of the spaces layouts, develop the types of furniture and finishes that would address each space. Room Data Sheet for each type of space will be developed. Describe furniture and finishes in a generic way, with at least 3 examples of different vendors for each type. Create tables and schedules to reflect and cross reference all choices made. Develop visuals and easy "flash cards" to use in ordering individual spaces furniture or finishes. Design recommendations to accompany each type.

The overall design concept and palette of furniture and finishes will be consistent with work done todate at the Public Defender office and Adult Probation at CCAB.

FINAL PHASE:

The overall FIRST DRAFT OF SPACE AND FURNITURE STANDARDS FOR ADMINISTRATIVE SPACES document will be reviewed with facilities and OCP & P and comments will be reflected in the FINAL DRAFT. Upon approval of THE FINAL DRAFT, the Building Standards Document will be issued. The latter document could be periodically updated, using lessons learned from each project. There will be interface with the office of Real Estate, with the Space committee, with Procurement, as well as with other departments within Cook County.

DELIVERABLES (Tentative)

Building Standards Document:

- I. Executive Summary of overall Design concept and County mission
- II. Categories of spaces: Offices, Collaborative and Support Spaces. Each Category listing of applicable Types.
- III. Room Data Sheets for each Type with sample plan layouts, furniture listing and dimensions; proposed generic furniture
- IV. 3D and/or 2D elevation views of major spaces
- V. Photographic Samples of similar and executed work (PD offices).

SCHEDULE

Standards Design Development (8-10 weeks)

- | | |
|-------------|---|
| Phase One: | Survey of spaces and categories determination |
| Phase Two: | Development of Individual Types of Spaces |
| Phase Three | Room Data Sheets with sample layouts and generic furniture and design recommendations |



Standards Drafts and Reviews (4-6 weeks):

Standards First Draft

Standards Second Draft

Issue Final Document

FEE FOR SERVICES

RADA Architects Team for this project consists of: Principal-in-Charge and Head of Design- Rada Doytcheva, Alvin Ho, current Project Manager for Adult Probation Renovation and point of contact for the Standards and Doug Boldt, current Project Manager for the Public Defender Renovation. All team individuals are intimately involved with current CCAB work. We are proposing a fee for our services as listed below: \$96,000.

Standards Design Development (Three Phases):	Duration 8-10 weeks	\$72,000
Standards Drafts and Reviews:	Duration 4-6 weeks	\$24,000
Total proposed fee for services:		\$96,000

CONTRACT EXTENSION

We would also like to request to extend our contract expiration date by 365 days to 2/1/2018 as the project will not be completed by the current expiration date, 2/1/2017

We appreciate all opportunities and we look forward to working with you on this assignment.

Respectfully submitted,

A handwritten signature in black ink, appearing to read "R. Doytcheva", written over a faint, larger signature.

Rada Doytcheva, PhD, AIA, AIA, LEED AP BD+C
Principal
RADA Architects Ltd

Attachments: various materials from past Standard Meetings

PROJECT: COOK COUNTY BUILDING STANDARDS
RADA Architects Cost Loaded Schedule

6/2/2016

1 BASIC SERVICES

Phase One

	Estimated Hours	\$/hr	total
Principal in charge / Rada Doytcheva	55	\$ 228	\$ 12,553
Project Architect / Doug Boldt	66	\$ 102	\$ 6,727
Draftsman #1 / Adam Lisak	62	\$ 76	\$ 4,720
SUBTOTAL Rada Architects :	183		\$ 24,000
Total Phase One Fee		25.00%	\$ 24,000

Phase Two

	Estimated Hours	\$/hr	total
Principal in charge / Rada Doytcheva	50	\$ 228	\$ 11,412
Project Architect / Doug Boldt	62	\$ 102	\$ 6,319
Draftsman #1 / Adam Lisak	42	\$ 76	\$ 3,211
Draftsman # 2 tbd	40	\$ 76	\$ 3,058
SUBTOTAL Rada Architects :	194		\$ 24,000
Total Phase Two Fee		25.00%	\$ 24,000

Phase Three

	Estimated Hours	\$/hr	total
Principal in charge / Rada Doytcheva	64	\$ 228	\$ 14,608
Project Architect / Doug Boldt	62	\$ 102	\$ 6,319
Draftsman #1 / Adam Lisak	20	\$ 76	\$ 1,544
Draftsman # 2 tbd	20	\$ 76	\$ 1,530
SUBTOTAL Rada Architects :	166		\$ 24,000
Total Phase Three Fee		25.00%	\$ 24,000

Standards Drafts & Reveiws

	Estimated Hours	\$/hr	total
Principal in charge / Rada Doytcheva	50	\$ 228	\$ 11,412
Project Architect / Doug Boldt	67	\$ 102	\$ 6,829
Draftsman #1 / Adam Lisak	40	\$ 76	\$ 3,083
Draftsman # 2 tbd	35	\$ 76	\$ 2,675.84
SUBTOTAL Rada Architects :	192		\$ 24,000
Total Phase Two Fee		25.00%	\$ 24,000

Total Services Fee (Basic Services) \$ 96,000

ATTACHMENT B



TONI PRECKWINKLE

PRESIDENT

**Cook County Board
of Commissioners**

RICHARD R. BOYKIN
1st District

ROBERT STEELE
2nd District

JERRY BUTLER
3rd District

STANLEY MOORE
4th District

DEBORAH SIMS
5th District

JOAN PATRICIA MURPHY
6th District

JESUS G. GARCIA
7th District

LUIS ARROYO, JR.
8th District

PETER N. SILVESTRI
9th District

BRIDGET GAINER
10th District

JOHN P. DALEY
11th District

JOHN A. FRITCHEY
12th District

LARRY SUFFREDIN
13th District

GREGG GOSLIN
14th District

TIMOTHY O. SCHNEIDER
15th District

JEFFREY R. TOBOLSKI
16th District

SEAN M. MORRISON
17th District

OFFICE OF CONTRACT COMPLIANCE

JACQUELINE GOMEZ

DIRECTOR

118 N. Clark, County Building, Room 1020 • Chicago, Illinois 60602 • (312) 603-5502

July 19, 2016

Ms. Shannon E. Andrews
Chief Procurement Officer
118 N. Clark Street
County Building-Room 1018
Chicago, IL 60602

Re: Contract No. 1418-13262 (Amendment No. 2)
Professional Architectural and Design Services for CCAB Renovation Floor 7, 8, & 9
Department of Capital Planning and Policy

Dear Ms. Andrews:

The following bid for the above-referenced contract has been reviewed for compliance with the Minority- and Women-owned Business Enterprises (MBE/WBE) Ordinance and have been found to be responsive to the ordinance.

Bidder: RADA Architects, Ltd.

Original Contract Value: \$158,800.67

Increased Contract Value: \$108,806.00 (Amendment No. 1)

New Contract Value: \$267,606.34

Contract Extension: 12 months

New Contract Term: January 1, 2016 through February 1, 2017

Increased Contract Value: \$96,000.00 (Amendment No. 2)

New Contract Value: \$363,606.67

Contract Extension: 12 months

New Contract Term: February 2, 2016 through February 1, 2018

Contract Goal: 35% MBE/WBE

<u>MBE/WBE</u>	<u>Status</u>	<u>Certifying Agency</u>	<u>Commitment*</u>
RADA Architect, Ltd.	DBE (7)	City of Chicago	100% (Direct)

*Commitment percentages are based on the new contract value.

Original MBE/WBE forms were used in the determination of the responsiveness of this contract.

Sincerely,

Jacqueline Gomez
Contract Compliance Director
JG/ate

cc: Cho Ng, OCPO
Shelia V. Atkins, CPP
Tim Ozog, CPP

DBE UTILIZATION PLAN - FORM 1Contract No. 1418-13262
Amendment No. 2Professional Architectural and Design Services
Contract Name for CCAB Renovation Floors 7, 8, & 9Contract/RFP No.: Contract #1418-13262**I. BIDDER/PROPOSER DBE STATUS: (check the appropriate line)**☒ Bidder/Proposer is a certified DBE firm. (If so, attach copy of current Letter of Certification)☐ Bidder/Proposer is a Joint Venture and one or more Joint Venture partners are certified DBEs. (If so, attach copies of Letter(s) of Certification, a copy of Joint Venture Agreement clearly describing the role of the DBE firm(s) and its ownership interest in the Joint Venture and a completed Joint Venture Affidavit – available online at www.cookcountyil.gov/contractcompliance)**II.**☒**Direct Participation**☐**Indirect Participation**

Identify all firms that will perform as subcontractors/suppliers/consultants for the above-referenced Contract:

Name of Subcontractor: RADA Architects LtdAddress: 233 N Michigan Ave. #2320, Chicago, IL 60601E-mail: rada@rada-arch.comContact Person: Rada Doytcheva Phone: 312-856-1970Dollar Amount Participation: \$ 302,237.26 Percent Amount of Participation: 83 %Type of Firm: ☒ DBE ☐ Non-DBE*Letter of Intent attached? Yes ☒ No ☐*If DBE, Current Letter of Certification attached? Yes ☒ No ☐Name of Subcontractor: dbHMSAddress: 303 W Erie St, #510, Chicago, IL 60654E-mail: brubach@dbhms.comContact Person: Benjamin Rubach Phone: 312-915-0557Dollar Amount Participation: \$ 47,369.64 Percent Amount of Participation: 13 %Type of Firm: ☐ DBE ☒ Non-DBE*Letter of Intent attached? Yes ☐ No ☒*If DBE, Current Letter of Certification attached? Yes ☐ No ☒*Attach additional sheets as needed.**** Letter(s) of Intent and current Letters of Certification must be submitted at the time of bid or proposal response.**

DBE LETTER OF INTENT - FORM 2

Contract No. 1418-13262
Amendment No. 2

DBE Firm: RADA Architects Ltd
Contact Person: Rada Doytcheva
Address: 233 N Michigan Ave #2320
City/State: Chicago, IL Zip: 60601
Phone: 312-856-1970 Fax: 312-856-1978
Email: rada@rada-arch.com

Certifying Agency: City of Chicago
Certification Expiration Date: 4/1/2017
Ethnicity: Caucasian - Female
Bid/Proposal/Contract #: 1418-13262
FEIN #: 36-3945019

Participation: ☒ Direct ☐ Indirect

Will the DBE firm be subcontracting any of the goods or services of this contract to another firm?

☒ No ☐ Yes - Please attach explanation. Proposed Subcontractor(s): _____

The undersigned DBE is prepared to provide the following Commodities/Services for the above named Project/ Contract: (If more space is needed to fully describe DBE Firm's proposed scope of work and/or payment schedule, attach additional sheets)

Architectural Services

Indicate the Dollar Amount, Percentage, and the Terms of Payment for the above-described Commodities/ Services:

\$302,237.26

THE UNDERSIGNED PARTIES AGREE that this Letter of Intent will become a binding Subcontract Agreement for the above work, conditioned upon (1) the Bidder/Proposer's receipt of a signed contract from the County of Cook; (2) Undersigned Subcontractor remaining compliant with all relevant credentials, codes, ordinances and statutes required by Contractor, Cook County, and the State to participate as a DBE firm for the above work. The Undersigned Parties do also certify that they did not affix their signatures to this document until all areas under Description of Service/ Supply and Fee/Cost were completed.

x William Sitton
Signature (DBE)

William Sitton

Print Name

RADA Architects Ltd

Firm Name

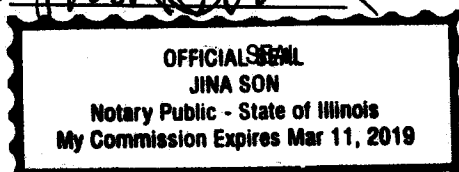
7/7/16

Date

Subscribed and sworn before me

this 7th day of July, 2016.

Notary Public [Signature]



DBE Letter of Intent - Form 2

x William Sitton
Signature (Prime Bidder/Proposer)

William Sitton

Print Name

RADA Architects Ltd

Firm Name

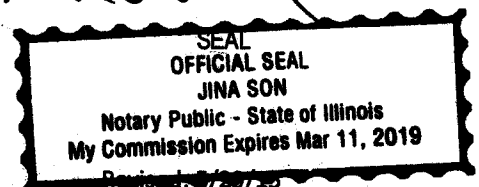
7/7/16

Date

Subscribed and sworn before me

this 7th day of July, 2016.

Notary Public [Signature]





DEPARTMENT OF PROCUREMENT SERVICES

FEB 18 2016

CITY OF CHICAGO

Ms. Radosveta Doytcheva
RADA Architects, Ltd.
233 N. Michigan Ave., Suite 2320
Chicago, IL 60601

Dear Radosveta Doytcheva:

The City of Chicago has reviewed your annual *No Change Affidavit* and supporting documentation and is pleased to inform you that your firm, **RADA Architects, Ltd.**, continues to meet the **Disadvantaged Business Enterprise ("DBE")** program certification eligibility standards set forth in 49 CFR Part 26. Your next No Change Affidavit is due **April 1, 2017**.

This certification allows your firm to participate as a DBE in the Illinois Unified Certification Program (IL UCP). The participating agencies include the Illinois Department of Transportation, the City of Chicago, the Chicago Transit Authority, Metra and Pace.

If there is any change in circumstances during the course of your certification period that affect your ability to meet size, disadvantaged status, ownership, or control requirements or any material change in the information provided in your initial application, you must provide written notification to this agency **within thirty (30) days** of the occurrence of the change. Failure to provide this information is a ground for denial of certification based on failure to cooperate pursuant to 49 CFR 26.109(c).

Your firm's name will appear in the IL UCP DBE Directory under the following category name(s):

NAICS Code(s):

541310 – Architectural (except landscape) Services
541310 – Building Architectural Design Services
541320 – Urban Planning Services
541340 – Drafting Services

The Directory is used by prime contractors/consultants, as well as other agencies, to solicit participation of DBE, and ACDBE firms. The Directory can be accessed on the Internet at <http://www.idot.illinois.gov/doing-business/certifications/disadvantaged-business-enterprise-certification/il-ucp-directory/index>.

Your participation on contracts will only be credited toward DBE contract goals when you perform in your firm's approved area(s) of specialty. Credit for participation in an area outside your specialty requires prior approval (verification of resources, expertise, and corresponding support documentation, etc.).

Sincerely,

Rich Butler
First Deputy Procurement Officer
RB/cm

PETITION FOR REDUCTION/WAIVER OF DBE PARTICIPATION – FORM 3

A. BIDDER/PROPOSER HEREBY REQUESTS:

- ☐ FULL DBE WAIVER ☐ REDUCTION (PARTIAL DBE PARTICIPATION)
_____ % of Reduction for DBE Participation

B. REASON FOR FULL/REDUCTION WAIVER REQUEST

Bidder/Proposer shall check each item applicable to its reason for a waiver request. **Additionally, supporting documentation shall be submitted with this request.**

- ☐ (1) Lack of sufficient qualified DBEs capable of providing the goods or services required by the contract. **(please explain)**
- ☐ (2) The specifications and necessary requirements for performing the contract make it impossible or economically infeasible to divide the contract to enable the contractor to utilize DBEs in accordance with the applicable participation **(please explain)**
- ☐ (3) Price(s) quoted by potential DBEs are above competitive levels and increase cost of doing business and would make acceptance of such DBE bid economically impracticable, taking into consideration the percentage of total contract price represented by such DBE bid **(please explain)**
- ☐ (4) There are other relevant factors making it impossible or economically infeasible to utilize DBE firms **(please explain)**

C. GOOD FAITH EFFORTS TO OBTAIN DBE PARTICIPATION

- ☐ (1) Made timely written solicitation to identified DBEs for utilization of goods and/or services; and provided DBEs with a timely opportunity to review and obtain relevant specifications, terms and conditions of the proposal to enable DBEs to prepare an informed response to solicitation **(Attach copy of written solicitations made)**
- ☐ (2) Use the services and assistance of the Office of Contract Compliance Staff **(please explain)**
- ☐ (3) Timely notified and used the services and assistance of community, minority and women business organizations. **(Attach copy of written solicitations made)**
- ☐ (4) Followed up initial solicitation of DBEs to determine if firms are interested in doing business **(Attach copy of written solicitations made)**
- ☐ (5) Engaged DBEs for direct/indirect participation **(please explain)**

D. OTHER RELEVANT INFORMATION

Attach any other documentation relative to Good Faith Efforts in complying with DBE participation.

Cook County
Office of the Chief Procurement Officer
Identification of Subcontractor/Supplier/Subconsultant Form

OCPO ONLY:

☐ Disqualification
☐ Check Complete

The Bidder/Proposer/Respondent ("the Contractor") will fully complete and execute and submit an Identification of Subcontractor/Supplier/Subconsultant Form ("ISF") with each Bid, Request for Proposal, and Request for Qualification. **The Contractor must complete the ISF for each Subcontractor, Supplier or Subconsultant which shall be used on the Contract.** In the event that there are any changes in the utilization of Subcontractors, Suppliers or Subconsultants, the Contractor must file an updated ISF.

Bid/RFP/RFQ No.: 1418-13262	Date: 7/7/16
Total Contract Amount Total Bid or Proposal Amount: \$363,606.67	Contract Title: Professional Architectural and Design Services for CCAB Renovation Floors 7, 8, & 9
Contractor: RADA Architects	Subcontractor/Supplier/ Subconsultant to be dbHMS added or substitute:
Authorized Contact for Contractor: Doug Boldt	Authorized Contact for Subcontractor/Supplier/ Subconsultant: Benjamin Rubach
Email Address (Contractor): dboldt@rada-arch.com	Email Address (Subcontractor): brubach@dbhms.com
Company Address 233 N Michigan Ave, #2320 (Contractor):	Company Address 303 W Erie St, #510 (Subcontractor):
City, State and Zip (Contractor): Chicago, IL 60601	City, State and Zip (Subcontractor): Chicago, IL 60654
Telephone and Fax P: 312-856-1970 (Contractor) F: 312-856-1978	Telephone and Fax P: 312-915-0557 (Subcontractor) F: 312-915-0558
Estimated Start and Completion Dates (Contractor)	Estimated Start and Completion Dates (Subcontractor)

Note: Upon request, a copy of all written subcontractor agreements must be provided to the OCPO.

<u>Description of Services or Supplies</u>	<u>Total Price of Subcontract for Services or Supplies</u>
MEP/FP Engineering Services	\$47,369.64

The subcontract documents will incorporate all requirements of the Contract awarded to the Contractor as applicable. The subcontract will in no way hinder the Subcontractor/Supplier/Subconsultant from maintaining its progress on any other contract on which it is either a Subcontractor/Supplier/Subconsultant or principal contractor. This disclosure is made with the understanding that the Contractor is not under any circumstances relieved of its abilities and obligations, and is responsible for the organization, performance, and quality of work. **This form does not approve any proposed changes, revisions or modifications to the contract approved MBE/WBE Utilization Plan. Any changes to the contract's approved MBE/WBE/Utilization Plan must be submitted to the Office of the Contract Compliance.**

Contractor
William Sittton

Name

Principal

Title

Prime Contractor Signature

7/7/16

Date

**COOK COUNTY
ECONOMIC DISCLOSURE STATEMENT
AND EXECUTION DOCUMENT
INDEX**

Section	Description	Pages
1	Instructions for Completion of EDS	EDS i - ii
2	Certifications	EDS 1- 2
3	Economic and Other Disclosures, Affidavit of Child Support Obligations, Disclosure of Ownership Interest and Familial Relationship Disclosure Form	EDS 3 – 12
4	Cook County Affidavit for Wage Theft Ordinance	EDS 13-14
5	Contract and EDS Execution Page	EDS 15-17
6	Cook County Signature Page	EDS 18

Foreign Corporations

Effective October 1, 2016 all foreign corporations and LLCs must be registered with the Illinois Secretary of State's Office unless a statutory exemption applies to the applicant. Applicants who are exempt from registering must provide a written statement explaining why they are exempt from registering as a foreign entity with the Illinois Secretary of State's Office.

SECTION 1
INSTRUCTIONS FOR COMPLETION OF
ECONOMIC DISCLOSURE STATEMENT AND EXECUTION DOCUMENT

This Economic Disclosure Statement and Execution Document ("EDS") is to be completed and executed by every Bidder on a County contract, every Proposer responding to a Request for Proposals, and every Respondent responding to a Request for Qualifications, and others as required by the Chief Procurement Officer. The execution of the EDS shall serve as the execution of a contract awarded by the County. The Chief Procurement Officer reserves the right to request that the Bidder or Proposer, or Respondent provide an updated EDS on an annual basis.

Definitions. Terms used in this EDS and not otherwise defined herein shall have the meanings given to such terms in the Instructions to Bidders, General Conditions, Request for Proposals, Request for Qualifications, as applicable.

Affiliate means a person that directly or indirectly through one or more intermediaries, Controls is Controlled by, or is under common Control with the Person specified.

Applicant means a person who executes this EDS.

Bidder means any person who submits a Bid.

Code means the Code of Ordinances, Cook County, Illinois available on municode.com.

Contract shall include any written document to make Procurements by or on behalf of Cook County.

Contractor or *Contracting Party* means a person that enters into a Contract with the County.

Control means the unfettered authority to directly or indirectly manage governance, administration, work, and all other aspects of a business.

EDS means this complete Economic Disclosure Statement and Execution Document, including all sections listed in the Index and any attachments.

Joint Venture means an association of two or more Persons proposing to perform a for-profit business enterprise. Joint Ventures must have an agreement in writing specifying the terms and conditions of the relationship between the partners and their relationship and respective responsibility for the Contract

Lobby or *lobbying* means to, for compensation, attempt to influence a County official or County employee with respect to any County matter.

Lobbyist means any person who lobbies.

Person or *Persons* means any individual, corporation, partnership, Joint Venture, trust, association, Limited Liability Company, sole proprietorship or other legal entity.

Prohibited Acts means any of the actions or occurrences which form the basis for disqualification under the Code, or under the Certifications hereinafter set forth.

Proposal means a response to an RFP.

Proposer means a person submitting a Proposal.

Response means response to an RFQ.

Respondent means a person responding to an RFQ.

RFP means a Request for Proposals issued pursuant to this Procurement Code.

RFQ means a Request for Qualifications issued to obtain the qualifications of interested parties.

**INSTRUCTIONS FOR COMPLETION OF
ECONOMIC DISCLOSURE STATEMENT AND EXECUTION DOCUMENT**

Section 1: Instructions. Section 1 sets forth the instructions for completing and executing this EDS.

Section 2: Certifications. Section 2 sets forth certifications that are required for contracting parties under the Code and other applicable laws. Execution of this EDS constitutes a warranty that all the statements and certifications contained, and all the facts stated, in the Certifications are true, correct and complete as of the date of execution.

Section 3: Economic and Other Disclosures Statement. Section 3 is the County's required Economic and Other Disclosures Statement form. Execution of this EDS constitutes a warranty that all the information provided in the EDS is true, correct and complete as of the date of execution, and binds the Applicant to the warranties, representations, agreements and acknowledgements contained therein.

Required Updates. The Applicant is required to keep all information provided in this EDS current and accurate. In the event of any change in the information provided, including but not limited to any change which would render inaccurate or incomplete any certification or statement made in this EDS, the Applicant shall supplement this EDS up to the time the County takes action, by filing an amended EDS or such other documentation as is required.

Additional Information. The County's Governmental Ethics and Campaign Financing Ordinances impose certain duties and obligations on persons or entities seeking County contracts, work, business, or transactions, and the Applicant is expected to comply fully with these ordinances. For further information please contact the Director of Ethics at (312) 603-4304 (69 W. Washington St. Suite 3040, Chicago, IL 60602) or visit the web-site at cookcountyiil.gov/ethics-board-of.

Authorized Signers of Contract and EDS Execution Page. If the Applicant is a corporation, the President and Secretary must execute the EDS. In the event that this EDS is executed by someone other than the President, attach hereto a certified copy of that section of the Corporate By-Laws or other authorization by the Corporation, satisfactory to the County that permits the person to execute EDS for said corporation. If the corporation is not registered in the State of Illinois, a copy of the Certificate of Good Standing from the state of incorporation must be submitted with this Signature Page.

If the Applicant is a partnership or joint venture, all partners or joint venturers must execute the EDS, unless one partner or joint venture has been authorized to sign for the partnership or joint venture, in which case, the partnership agreement, resolution or evidence of such authority satisfactory to the Office of the Chief Procurement Officer must be submitted with this Signature Page.

If the Applicant is a member-managed LLC all members must execute the EDS, unless otherwise provided in the operating agreement, resolution or other corporate documents. If the Applicant is a manager-managed LLC, the manager(s) must execute the EDS. The Applicant must attach either a certified copy of the operating agreement, resolution or other authorization, satisfactory to the County, demonstrating such person has the authority to execute the EDS on behalf of the LLC. If the LLC is not registered in the State of Illinois, a copy of a current Certificate of Good Standing from the state of incorporation must be submitted with this Signature Page.

If the Applicant is a Sole Proprietorship, the sole proprietor must execute the EDS.

A "Partnership" "Joint Venture" or "Sole Proprietorship" operating under an Assumed Name must be registered with the Illinois county in which it is located, as provided in 805 ILCS 405 (2012), and documentation evidencing registration must be submitted with the EDS.

Effective October 1, 2016 all foreign corporations and LLCs must be registered with the Illinois Secretary of State's Office unless a statutory exemption applies to the applicant. Applicants who are exempt from registering must provide a written statement explaining why they are exempt from registering as a foreign entity with the Illinois Secretary of State's Office.

SECTION 2**CERTIFICATIONS**

THE FOLLOWING CERTIFICATIONS ARE MADE PURSUANT TO STATE LAW AND THE CODE. THE APPLICANT IS CAUTIONED TO CAREFULLY READ THESE CERTIFICATIONS PRIOR TO SIGNING THE SIGNATURE PAGE. SIGNING THE SIGNATURE PAGE SHALL CONSTITUTE A WARRANTY BY THE APPLICANT THAT ALL THE STATEMENTS, CERTIFICATIONS AND INFORMATION SET FORTH WITHIN THESE CERTIFICATIONS ARE TRUE, COMPLETE AND CORRECT AS OF THE DATE THE SIGNATURE PAGE IS SIGNED. THE APPLICANT IS NOTIFIED THAT IF THE COUNTY LEARNS THAT ANY OF THE FOLLOWING CERTIFICATIONS WERE FALSELY MADE, THAT ANY CONTRACT ENTERED INTO WITH THE APPLICANT SHALL BE SUBJECT TO TERMINATION.

A. PERSONS AND ENTITIES SUBJECT TO DISQUALIFICATION

No person or business entity shall be awarded a contract or sub-contract, for a period of five (5) years from the date of conviction or entry of a plea or admission of guilt, civil or criminal, if that person or business entity:

- 1) Has been convicted of an act committed, within the State of Illinois, of bribery or attempting to bribe an officer or employee of a unit of state, federal or local government or school district in the State of Illinois in that officer's or employee's official capacity;
- 2) Has been convicted by federal, state or local government of an act of bid-rigging or attempting to rig bids as defined in the Sherman Anti-Trust Act and Clayton Act. Act. 15 U.S.C. Section 1 *et seq.*;
- 3) Has been convicted of bid-rigging or attempting to rig bids under the laws of federal, state or local government;
- 4) Has been convicted of an act committed, within the State, of price-fixing or attempting to fix prices as defined by the Sherman Anti-Trust Act and the Clayton Act. 15 U.S.C. Section 1, *et seq.*;
- 5) Has been convicted of price-fixing or attempting to fix prices under the laws the State;
- 6) Has been convicted of defrauding or attempting to defraud any unit of state or local government or school district within the State of Illinois;
- 7) Has made an admission of guilt of such conduct as set forth in subsections (1) through (6) above which admission is a matter of record, whether or not such person or business entity was subject to prosecution for the offense or offenses admitted to; or
- 8) Has entered a plea of *nolo contendere* to charge of bribery, price-fixing, bid-rigging, or fraud, as set forth in subparagraphs (1) through (6) above.

In the case of bribery or attempting to bribe, a business entity may not be awarded a contract if an official, agent or employee of such business entity committed the Prohibited Act on behalf of the business entity and pursuant to the direction or authorization of an officer, director or other responsible official of the business entity, and such Prohibited Act occurred within three years prior to the award of the contract. In addition, a business entity shall be disqualified if an owner, partner or shareholder controlling, directly or indirectly, 20% or more of the business entity, or an officer of the business entity has performed any Prohibited Act within five years prior to the award of the Contract.

THE APPLICANT HEREBY CERTIFIES THAT: The Applicant has read the provisions of Section A, Persons and Entities Subject to Disqualification, that the Applicant has not committed any Prohibited Act set forth in Section A, and that award of the Contract to the Applicant would not violate the provisions of such Section or of the Code.

B. BID-RIGGING OR BID ROTATING

THE APPLICANT HEREBY CERTIFIES THAT: In accordance with 720 ILCS 5/33 E-11, neither the Applicant nor any Affiliated Entity is barred from award of this Contract as a result of a conviction for the violation of State laws prohibiting bid-rigging or bid rotating.

C. DRUG FREE WORKPLACE ACT

THE APPLICANT HEREBY CERTIFIES THAT: The Applicant will provide a drug free workplace, as required by (30 ILCS 580/3).

D. DELINQUENCY IN PAYMENT OF TAXES

THE APPLICANT HEREBY CERTIFIES THAT: *The Applicant is not an owner or a party responsible for the payment of any tax or fee administered by Cook County, such as bar award of a contract or subcontract pursuant to the Code, Chapter 34, Section 34-171.*

E. HUMAN RIGHTS ORDINANCE

No person who is a party to a contract with Cook County ("County") shall engage in unlawful discrimination or sexual harassment against any individual in the terms or conditions of employment, credit, public accommodations, housing, or provision of County facilities, services or programs (Code Chapter 42, Section 42-30 *et seq.*).

F. ILLINOIS HUMAN RIGHTS ACT

THE APPLICANT HEREBY CERTIFIES THAT: *It is in compliance with the Illinois Human Rights Act (775 ILCS 5/2-105), and agrees to abide by the requirements of the Act as part of its contractual obligations.*

G. INSPECTOR GENERAL (COOK COUNTY CODE, CHAPTER 34, SECTION 34-174 and Section 34-250)

The Applicant has not willfully failed to cooperate in an investigation by the Cook County Independent Inspector General or to report to the Independent Inspector General any and all information concerning conduct which they know to involve corruption, or other criminal activity, by another county employee or official, which concerns his or her office of employment or County related transaction.

The Applicant has reported directly and without any undue delay any suspected or known fraudulent activity in the County's Procurement process to the Office of the Cook County Inspector General.

H. CAMPAIGN CONTRIBUTIONS (COOK COUNTY CODE, CHAPTER 2, SECTION 2-585)

THE APPLICANT CERTIFIES THAT: It has read and shall comply with the Cook County's Ordinance concerning campaign contributions, which is codified at Chapter 2, Division 2, Subdivision II, Section 585, and can be read in its entirety at www.municode.com.

I. GIFT BAN, (COOK COUNTY CODE, CHAPTER 2, SECTION 2-574)

THE APPLICANT CERTIFIES THAT: It has read and shall comply with the Cook County's Ordinance concerning receiving and soliciting gifts and favors, which is codified at Chapter 2, Division 2, Subdivision II, Section 574, and can be read in its entirety at www.municode.com.

J. LIVING WAGE ORDINANCE PREFERENCE (COOK COUNTY CODE, CHAPTER 34, SECTION 34-160;

Unless expressly waived by the Cook County Board of Commissioners, the Code requires that a living wage must be paid to individuals employed by a Contractor which has a County Contract and by all subcontractors of such Contractor under a County Contract, throughout the duration of such County Contract. The amount of such living wage is annually by the Chief Financial Officer of the County, and shall be posted on the Chief Procurement Officer's website.

The term "Contract" as used in Section 4, I, of this EDS, specifically excludes contracts with the following:

- 1) Not-For Profit Organizations (defined as a corporation having tax exempt status under Section 501(C)(3) of the United State Internal Revenue Code and recognized under the Illinois State not-for-profit law);
- 2) Community Development Block Grants;
- 3) Cook County Works Department;
- 4) Sheriff's Work Alternative Program; and
- 5) Department of Correction inmates.

SECTION 3

REQUIRED DISCLOSURES

1. DISCLOSURE OF LOBBYIST CONTACTS

List all persons that have made lobbying contacts on your behalf with respect to this contract:

Name	Address
None	
_____	_____
_____	_____
_____	_____

2. LOCAL BUSINESS PREFERENCE STATEMENT (CODE, CHAPTER 34, SECTION 34-230)

Local business means a Person, including a foreign corporation authorized to transact business in Illinois, having a bona fide establishment located within the County at which it is transacting business on the date when a Bid is submitted to the County, and which employs the majority of its regular, full-time work force within the County. A Joint Venture shall constitute a Local Business if one or more Persons that qualify as a "Local Business" hold interests totaling over 50 percent in the Joint Venture, even if the Joint Venture does not, at the time of the Bid submittal, have such a bona fide establishment within the County.

a) Is Applicant a "Local Business" as defined above?

Yes: ☒ _____ No: ☐ _____

b) If yes, list business addresses within Cook County:

233 N Michigan Ave. #2320

Chicago, IL 60601

c) Does Applicant employ the majority of its regular full-time workforce within Cook County?

Yes: ☒ _____ No: ☐ _____

3. THE CHILD SUPPORT ENFORCEMENT ORDINANCE (CODE, CHAPTER 34, SECTION 34-172)

Every Applicant for a County Privilege shall be in full compliance with any child support order before such Applicant is entitled to receive or renew a County Privilege. When delinquent child support exists, the County shall not issue or renew any County Privilege, and may revoke any County Privilege.

All Applicants are required to review the Cook County Affidavit of Child Support Obligations attached to this EDS (EDS-5) and complete the Affidavit, based on the instructions in the Affidavit.

4. REAL ESTATE OWNERSHIP DISCLOSURES.

The Applicant must indicate by checking the appropriate provision below and providing all required information that either:

- a) The following is a complete list of all real estate owned by the Applicant in Cook County:

PERMANENT INDEX NUMBER(S): 17-10-318-031-1287

17-10-318-031-1286

17-10-400-012-1897

(ATTACH SHEET IF NECESSARY TO LIST ADDITIONAL INDEX NUMBERS)

OR:

- b) ☐ The Applicant owns no real estate in Cook County.

5. EXCEPTIONS TO CERTIFICATIONS OR DISCLOSURES.

If the Applicant is unable to certify to any of the Certifications or any other statements contained in this EDS and not explained elsewhere in this EDS, the Applicant must explain below:

None

If the letters, "NA", the word "None" or "No Response" appears above, or if the space is left blank, it will be conclusively presumed that the Applicant certified to all Certifications and other statements contained in this EDS.

COOK COUNTY DISCLOSURE OF OWNERSHIP INTEREST STATEMENT

The Cook County Code of Ordinances (§2-610 *et seq.*) requires that any Applicant for any County Action must disclose information concerning ownership interests in the Applicant. This Disclosure of Ownership Interest Statement must be completed with all information current as of the date this Statement is signed. Furthermore, this Statement must be kept current, by filing an amended Statement, until such time as the County Board or County Agency shall take action on the application. The information contained in this Statement will be maintained in a database and made available for public viewing.

If you are asked to list names, but there are no applicable names to list, you must state NONE. An incomplete Statement will be returned and any action regarding this contract will be delayed. A failure to fully comply with the ordinance may result in the action taken by the County Board or County Agency being voided.

"Applicant" means any Entity or person making an application to the County for any County Action.

"County Action" means any action by a County Agency, a County Department, or the County Board regarding an ordinance or ordinance amendment, a County Board approval, or other County agency approval, with respect to contracts, leases, or sale or purchase of real estate.

"Person" "Entity" or "Legal Entity" means a sole proprietorship, corporation, partnership, association, business trust, estate, two or more persons having a joint or common interest, trustee of a land trust, other commercial or legal entity or any beneficiary or beneficiaries thereof.

This Disclosure of Ownership Interest Statement must be submitted by :

1. An Applicant for County Action and
2. A Person that holds stock or a beneficial interest in the Applicant and is listed on the Applicant's Statement (a "Holder") must file a Statement and complete #1 only under **Ownership Interest Declaration**.

Please print or type responses clearly and legibly. Add additional pages if needed, being careful to identify each portion of the form to which each additional page refers.

This Statement is being made by the ☒ Applicant or ☐ Stock/Beneficial Interest Holder

This Statement is an: ☐ Original Statement or ☐ Amended Statement

Identifying Information:

Name RADA Architects Ltd

D/B/A: N/A

FEIN NO.: 36-3945019

Street Address: 233 N Michigan Ave. #2320

City: Chicago

State: IL

Zip Code: 60601

Phone No.: 312-856-1970

Fax Number: 312-856-1978

Email: contact@rada-arch.com

Cook County Business Registration Number: N/A

(Sole Proprietor, Joint Venture Partnership)

Corporate File Number (if applicable): 5776-028-1

Form of Legal Entity:

☐ Sole Proprietor ☐ Partnership ☒ Corporation ☐ Trustee of Land Trust

☐ Business Trust ☐ Estate ☐ Association ☐ Joint Venture

☐ Other (describe) _____

Ownership Interest Declaration:

1. List the name(s), address, and percent ownership of each Person having a legal or beneficial interest (including ownership) of more than five percent (5%) in the Applicant/Holder.

Name	Address	Percentage Interest in Applicant/Holder
Rada Doytcheva	360 E Randolph St. #4103	100%
	Chicago, IL 60601	
<hr/>		

2. If the interest of any Person listed in (1) above is held as an agent or agents, or a nominee or nominees, list the name and address of the principal on whose behalf the interest is held.

Name of Agent/Nominee	Name of Principal	Principal's Address
<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>

3. Is the Applicant constructively controlled by another person or Legal Entity? [☐] Yes [☒] No
If yes, state the name, address and percentage of beneficial interest of such person, and the relationship under which such control is being or may be exercised.

Name	Address	Percentage of Beneficial Interest	Relationship
<hr/>	<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>	<hr/>

Corporate Officers, Members and Partners Information:

For all corporations, list the names, addresses, and terms for all corporate officers. For all limited liability companies, list the names, addresses for all members. For all partnerships and joint ventures, list the names, addresses, for each partner or joint venture.

Name	Address	Title (specify title of Office, or whether manager or partner/joint venture)	Term of Office
<hr/>	<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>	<hr/>

Declaration (check the applicable box):

- ☒ I state under oath that the Applicant has withheld no disclosure as to ownership interest in the Applicant nor reserved any information, data or plan as to the intended use or purpose for which the Applicant seeks County Board or other County Agency action.
- ☒ I state under oath that the Holder has withheld no disclosure as to ownership interest nor reserved any information required to be disclosed.

COOK COUNTY DISCLOSURE OF OWNERSHIP INTEREST STATEMENT SIGNATURE PAGE

William Sitton

Name of Authorized Applicant/Holder Representative (please print or type)

X W. Sitton

Signature

wesitton@rada-arch.com

E-mail address

Principal

Title

7/7/16

Date

312-856-1970

Phone Number

Subscribed to and sworn before me
this 7th day of July, 2016

X

[Signature]
Notary Public Signature

My commission expires:



Notary Seal



COOK COUNTY BOARD OF ETHICS
 69 W. WASHINGTON STREET, SUITE 3040
 CHICAGO, ILLINOIS 60602
 312/603-4304 Office 312/603-9988 Fax

FAMILIAL RELATIONSHIP DISCLOSURE PROVISION

Nepotism Disclosure Requirement:

Doing a significant amount of business with the County requires that you disclose to the Board of Ethics the existence of any familial relationships with any County employee or any person holding elective office in the State of Illinois, the County, or in any municipality within the County. The Ethics Ordinance defines a significant amount of business for the purpose of this disclosure requirement as more than \$25,000 in aggregate County leases, contracts, purchases or sales in any calendar year.

If you are unsure of whether the business you do with the County or a County agency will cross this threshold, err on the side of caution by completing the attached familial disclosure form because, among other potential penalties, any person found guilty of failing to make a required disclosure or knowingly filing a false, misleading, or incomplete disclosure will be prohibited from doing any business with the County for a period of three years. The required disclosure should be filed with the Board of Ethics by January 1 of each calendar year in which you are doing business with the County and again with each bid/proposal/quotation to do business with Cook County. The Board of Ethics may assess a late filing fee of \$100 per day after an initial 30-day grace period.

The person that is doing business with the County must disclose his or her familial relationships. If the person on the County lease or contract or purchasing from or selling to the County is a business entity, then the business entity must disclose the familial relationships of the individuals who are and, during the year prior to doing business with the County, were:

- its board of directors,
- its officers,
- its employees or independent contractors responsible for the general administration of the entity,
- its agents authorized to execute documents on behalf of the entity, and
- its employees who directly engage or engaged in doing work with the County on behalf of the entity.

Do not hesitate to contact the Board of Ethics at (312) 603-4304 for assistance in determining the scope of any required familial relationship disclosure.

Additional Definitions:

"Familial relationship" means a person who is a spouse, domestic partner or civil union partner of a County employee or State, County or municipal official, or any person who is related to such an employee or official, whether by blood, marriage or adoption, as a:

- ☐ Parent
- ☐ Child
- ☐ Brother
- ☐ Sister
- ☐ Aunt
- ☐ Uncle
- ☐ Niece
- ☐ Nephew

- ☐ Grandparent
- ☐ Grandchild
- ☐ Father-in-law
- ☐ Mother-in-law
- ☐ Son-in-law
- ☐ Daughter-in-law
- ☐ Brother-in-law
- ☐ Sister-in-law

- ☒ Stepfather
- ☒ Stepmother
- ☐ Stepson
- ☐ Stepdaughter
- ☐ Stepbrother
- ☐ Stepsister
- ☐ Halfbrother
- ☐ Halfsister

**COOK COUNTY BOARD OF ETHICS
FAMILIAL RELATIONSHIP DISCLOSURE FORM**

A. PERSON DOING OR SEEKING TO DO BUSINESS WITH THE COUNTY

Name of Person Doing Business with the County: RADA Architects Ltd

Address of Person Doing Business with the County: 233 N Michigan Ave, #2320, Chicago, IL 60601

Phone number of Person Doing Business with the County: 312-856-1970

Email address of Person Doing Business with the County: contact@rada-arch.com

If Person Doing Business with the County is a Business Entity, provide the name, title and contact information for the individual completing this disclosure on behalf of the Person Doing Business with the County:

William Sitton, Principal, RADA Architects, 312-856-1970, wesitton@rada-arch.com

B. DESCRIPTION OF BUSINESS WITH THE COUNTY

Append additional pages as needed and for each County lease, contract, purchase or sale sought and/or obtained during the calendar year of this disclosure (or the proceeding calendar year if disclosure is made on January 1), identify:

The lease number, contract number, purchase order number, request for proposal number and/or request for qualification number associated with the business you are doing or seeking to do with the County: _____

Contract #1418-13262

The aggregate dollar value of the business you are doing or seeking to do with the County: \$ 363,606.67

The name, title and contact information for the County official(s) or employee(s) involved in negotiating the business you are doing or seeking to do with the County: _____

Sheila Atkins, Project Director, Office of Capital Planning & Policy

The name, title and contact information for the County official(s) or employee(s) involved in managing the business you are doing or seeking to do with the County: _____

Sheila Atkins, Project Director, Office of Capital Planning & Policy

C. DISCLOSURE OF FAMILIAL RELATIONSHIPS WITH COUNTY EMPLOYEES OR STATE, COUNTY OR MUNICIPAL ELECTED OFFICIALS

Check the box that applies and provide related information where needed

☐ The Person Doing Business with the County is **an individual** and there is **no familial relationship** between this individual and any Cook County employee or any person holding elective office in the State of Illinois, Cook County, or any municipality within Cook County.

☒ The Person Doing Business with the County is **a business entity** and there is **no familial relationship** between any member of this business entity's board of directors, officers, persons responsible for general administration of the business entity, agents authorized to execute documents on behalf of the business entity or employees directly engaged in contractual work with the County on behalf of the business entity, and any Cook County employee or any person holding elective office in the State of Illinois, Cook County, or any municipality within Cook County.

**COOK COUNTY BOARD OF ETHICS
FAMILIAL RELATIONSHIP DISCLOSURE FORM**

- ☐ The Person Doing Business with the County **is an individual and there is a familial relationship** between this individual and at least one Cook County employee and/or a person or persons holding elective office in the State of Illinois, Cook County, and/or any municipality within Cook County. **The familial relationships are as follows:**

Name of Individual Doing Business with the County	Name of Related County Employee or State, County or Municipal Elected Official	Title and Position of Related County Employee or State, County or Municipal Elected Official	Nature of Familial Relationship*
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

If more space is needed, attach an additional sheet following the above format.

- ☐ The Person Doing Business with the County **is a business entity and there is a familial relationship** between at least one member of this business entity's board of directors, officers, persons responsible for general administration of the business entity, agents authorized to execute documents on behalf of the business entity and/or employees directly engaged in contractual work with the County on behalf of the business entity, on the one hand, and at least one Cook County employee and/or a person holding elective office in the State of Illinois, Cook County, and/or any municipality within Cook County, on the other. **The familial relationships are as follows:**

Name of Member of Board of Director for Business Entity Doing Business with the County	Name of Related County Employee or State, County or Municipal Elected Official	Title and Position of Related County Employee or State, County or Municipal Elected Official	Nature of Familial Relationship*
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Name of Officer for Business Entity Doing Business with the County	Name of Related County Employee or State, County or Municipal Elected Official	Title and Position of Related County Employee or State, County or Municipal Elected Official	Nature of Familial Relationship*
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Name of Person Responsible for the General Administration of the Business Entity Doing Business with the County	Name of Related County Employee or State, County or Municipal Elected Official	Title and Position of Related County Employee or State, County or Municipal Elected Official	Nature of Familial Relationship*
---	--	--	-------------------------------------

_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Name of Agent Authorized to Execute Documents for Business Entity Doing Business with the County	Name of Related County Employee or State, County or Municipal Elected Official	Title and Position of Related County Employee or State, County or Municipal Elected Official	Nature of Familial Relationship*
---	--	--	-------------------------------------


_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Name of Employee of Business Entity Directly Engaged in Doing Business with the County	Name of Related County Employee or State, County or Municipal Elected Official	Title and Position of Related County Employee or State, County or Municipal Elected Official	Nature of Familial Relationship*
---	--	--	-------------------------------------

_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

If more space is needed, attach an additional sheet following the above format.

VERIFICATION: To the best of my knowledge, the information I have provided on this disclosure form is accurate and complete. I acknowledge that an inaccurate or incomplete disclosure is punishable by law, including but not limited to fines and debarment.

William Sitton x 
Signature of Recipient

7/7/16
Date

SUBMIT COMPLETED FORM TO:

Cook County Board of Ethics
69 West Washington Street, Suite 3040, Chicago, Illinois 60602
Office (312) 603-4304 – Fax (312) 603-9988
CookCounty.Ethics@cookcountyil.gov

* Spouse, domestic partner, civil union partner or parent, child, sibling, aunt, uncle, niece, nephew, grandparent or grandchild by blood, marriage (*i.e.* in laws and step relations) or adoption.

SECTION 4

COOK COUNTY AFFIDAVIT FOR WAGE THEFT ORDINANCE

Effective May 1, 2015, every Person, ***including Substantial Owners***, seeking a Contract with Cook County must comply with the Cook County Wage Theft Ordinance set forth in Chapter 34, Article IV, Section 179. Any Person/Substantial Owner, who fails to comply with Cook County Wage Theft Ordinance, may request that the Chief Procurement Officer grant a reduction or waiver in accordance with Section 34-179(d).

"Contract" means any written document to make Procurements by or on behalf of Cook County.

"Person" means any individual, corporation, partnership, Joint Venture, trust, association, limited liability company, sole proprietorship or other legal entity.

"Procurement" means obtaining supplies, equipment, goods, or services of any kind.

"Substantial Owner" means any person or persons who own or hold a twenty-five percent (25%) or more percentage of interest in any business entity seeking a County Privilege, including those shareholders, general or limited partners, beneficiaries and principals; except where a business entity is an individual or sole proprietorship, Substantial Owner means that individual or sole proprietor.

All Persons/Substantial Owners are required to complete this affidavit and comply with the Cook County Wage Theft Ordinance before any Contract is awarded. Signature of this form constitutes a certification the information provided below is correct and complete, and that the individual(s) signing this form has/have personal knowledge of such information.

I. Contract Information:

Contract Number: 1418-13262

County Using Agency (requesting Procurement): Office of Capital Planning and Policy

II. Person/Substantial Owner Information:

Person (Corporate Entity Name): RADA Architects Ltd

Substantial Owner Complete Name: Rada Doytcheva

FEIN# 36-3945019

Date of Birth: _____ E-mail address: rada@rada-arch.com

Street Address: 360 E Randolph St. #4103

City: Chicago State: IL Zip: 60601

Home Phone: (312) 819 - 1703

III. Compliance with Wage Laws:

Within the past five years has the Person/Substantial Owner, in any judicial or administrative proceeding, been convicted of, entered a plea, made an admission of guilt or liability, or had an administrative finding made for committing a repeated or willful violation of any of the following laws:

No *Illinois Wage Payment and Collection Act, 820 ILCS 115/1 et seq.,*

No *Illinois Minimum Wage Act, 820 ILCS 105/1 et seq.,*

No *Illinois Worker Adjustment and Retraining Notification Act, 820 ILCS 65/1 et seq.,*

No *Employee Classification Act, 820 ILCS 185/1 et seq.,*

No *Fair Labor Standards Act of 1938, 29 U.S.C. 201, et seq.,*

No *Any comparable state statute or regulation of any state, which governs the payment of wages*

If the Person/Substantial Owner answered "Yes" to any of the questions above, it is ineligible to enter into a Contract with Cook County, but can request a reduction or waiver under **Section IV**.

IV. Request for Waiver or Reduction

If Person/Substantial Owner answered "Yes" to any of the questions above, it may request a reduction or waiver in accordance with Section 34-179(d), provided that the request for reduction of waiver is made on the basis of one or more of the following actions that have taken place:

- No *There has been a bona fide change in ownership or Control of the ineligible Person or Substantial Owner*
- No *Disciplinary action has been taken against the individual(s) responsible for the acts giving rise to the violation*
- No *Remedial action has been taken to prevent a recurrence of the acts giving rise to the disqualification or default*
- No *Other factors that the Person or Substantial Owner believe are relevant.*

The Person/Substantial Owner must submit documentation to support the basis of its request for a reduction or waiver. The Chief Procurement Officer reserves the right to make additional inquiries and request additional documentation.

V. Affirmation

The Person/Substantial Owner affirms that all statements contained in the Affidavit are true, accurate and complete.

Signature: x *William Sitton*

Date: 7/7/16

Name of Person signing (Print): William Sitton

Title: Principal

Subscribed and sworn to before me this 7th day of July, 20 16

x *Jina Son*
Notary Public Signature

Note: The above information is subject to verification prior to the award of the Contract.



SECTION 5

CONTRACT AND EDS EXECUTION PAGE

PLEASE EXECUTE THREE ORIGINAL PAGES OF EDS

The Applicant hereby certifies and warrants that all of the statements, certifications and representations set forth in this EDS are true, complete and correct; that the Applicant is in full compliance and will continue to be in compliance throughout the term of the Contract or County Privilege issued to the Applicant with all the policies and requirements set forth in this EDS; and that all facts and information provided by the Applicant in this EDS are true, complete and correct. The Applicant agrees to inform the Chief Procurement Officer in writing if any of such statements, certifications, representations, facts or information becomes or is found to be untrue, incomplete or incorrect during the term of the Contract or County Privilege.

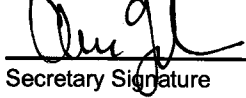
Execution by Corporation

RADA Architects Ltd

Corporation's Name

312-856-1970

Telephone



Secretary Signature

 x 

President's Printed Name and Signature

wesitton@rada-arch.com

Email

7/7/16

Date

Execution by LLC

LLC Name

*Member/Manager Printed Name and Signature

Date

Telephone and Email

Execution by Partnership/Joint Venture

Partnership/Joint Venture Name

*Partner/Joint Venturer Printed Name and Signature

Date

Telephone and Email

Execution by Sole Proprietorship

Printed Name Signature

Assumed Name (if applicable)

Date

Telephone and Email

Subscribed and sworn to before me this

7th day of July, 2016.



Notary Public Signature

My commission expires: 3/11/2019

Notary Seal

OFFICIAL SEAL

JINA SON

Notary Public - State of Illinois
My Commission Expires Mar 11, 2019

*If the operating agreement, partnership agreement or governing document requires execution by multiple members, managers, partners, or joint venturers, please complete and execute additional Contract and EDS Execution Pages.

ACORD™

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

7/11/2016

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER USI Ins Svcs LLC Euclid-Prof 2021 Spring Road, Suite 100 Oak Brook, IL 60523 312 442-7200	CONTACT NAME: PHONE (A/C, No, Ext): 630 625-5219 FAX (A/C, No): 610 537-4939 E-MAIL ADDRESS: laurie.cloninger@usi.biz														
INSURED RADA Architects, Ltd. 233 N Michigan Ave Ste 2320 Chicago, IL 60601	<table border="1"> <thead> <tr> <th>INSURER(S) AFFORDING COVERAGE</th> <th>NAIC #</th> </tr> </thead> <tbody> <tr> <td>INSURER A: RLI Insurance Company</td> <td>13056</td> </tr> <tr> <td>INSURER B: Argonaut Insurance Company</td> <td>19801</td> </tr> <tr> <td>INSURER C:</td> <td></td> </tr> <tr> <td>INSURER D:</td> <td></td> </tr> <tr> <td>INSURER E:</td> <td></td> </tr> <tr> <td>INSURER F:</td> <td></td> </tr> </tbody> </table>	INSURER(S) AFFORDING COVERAGE	NAIC #	INSURER A: RLI Insurance Company	13056	INSURER B: Argonaut Insurance Company	19801	INSURER C:		INSURER D:		INSURER E:		INSURER F:	
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COVERAGES

CERTIFICATE NUMBER:

REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL SUBR INSR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PROJECT <input type="checkbox"/> LOC OTHER:	Y	Y	PSB0002707	12/31/2015	12/31/2016	EACH OCCURRENCE \$1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$1,000,000 MED EXP (Any one person) \$10,000 PERSONAL & ADV INJURY \$1,000,000 GENERAL AGGREGATE \$2,000,000 PRODUCTS - COMP/OP AGG \$2,000,000 \$
A	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS	Y	Y	PSB0002707	12/31/2015	12/31/2016	COMBINED SINGLE LIMIT (Ea accident) \$1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
A	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED \$ RETENTION \$	Y	Y	PSE0001863	12/31/2015	12/31/2016	EACH OCCURRENCE \$5,000,000 AGGREGATE \$5,000,000 \$
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? <input checked="" type="checkbox"/> Y <input type="checkbox"/> N (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y	N/A	PSW0002352	12/31/2015	12/31/2016	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTHER E.L. EACH ACCIDENT \$1,000,000 E.L. DISEASE - EA EMPLOYEE \$1,000,000 E.L. DISEASE - POLICY LIMIT \$1,000,000
B	Professional Liability		IAE1284801	03/03/2016	03/03/2017	\$2,000,000 each claim / annual aggregate	

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

RE: CCAB RENOVATION FLOORS 7, 8 & 9.

The General/Auto and Umbrella Liability policies include an automatic Additional Insured endorsement that provides Additional Insured status to Cook County, its officials, employees and agents only when there is a written contract that requires such status, and only with regard to work performed by the named insured.

The General Liability policy contains a special endorsement with "Primary and Noncontributory" wording.

(See Attached Descriptions)

CERTIFICATE HOLDER

CANCELLATION

Cook County
 69 W Washington
 Suite 500
 Chicago, IL 60602

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE



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DESCRIPTIONS (Continued from Page 1)

The General/Auto Liability, Umbrella Liability, Workers Compensation and Professional Liability policies provide a Waiver of Subrogation when required by written contract.

Professional Liability is written on a 'claims made' policy form.
Some or all officers are excluded from Workers Compensation coverage.